

# Work Order ID 101179

**\*101179\***

Page 1

May 2, 2013 12:47:30 PM

Item ID: D4022-3

Accept

**\*N9000040100\***

Setup Start **\*NS1\***

Revision ID:

Item Name: Fuel Pump Mounting Bracket

Stop **\*NS2\***

Start Date: 5/02/13 Start Qty: 10.00

**\*10\***

Cust Item ID:

Required Date: 5/08/13 Req'd Qty: 10.00

**\*10\***

Customer:

Reference:

Approvals: Process Plan: CL

Date: 13/05/02 Tooling:

Date:

Run Start **\*NR1\***

QC:

Date:

SPC (Y/N):

Date:

Stop **\*NP2\***

Sequence 10  
Work Center 10

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Resp.  
Stamp

Draw Nbr

Revision Nbr

D4022

C

100

0.00

**\*100\***

Purchasing

Memo

0.00

Purchasing

Issue P/O: 19767  
Purchase part as per Dwg D4022  
Part #: TC 250-100  
Possible Supplier: Weldon  
Material release note required

CL 13/05/02 (10)

110

Receive & Inspect for Damage & Mat'l Certs

0.00

**\*110\***

Packaging

Memo

0.00

Packaging

13/05/16 (10)

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

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**\*101179\***

Page 2

Item ID: D4022-3

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Fuel Pump Mounting Bracket

Start Date: 5/02/13 Start Qty: 10.00

**\*10\***

Cust Item ID:

Required Date: 5/08/13 Req'd Qty: 10.00

**\*10\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

120

QC6- Inspect dimensions to drawing

0.00

**\*120\***

QC

Memo

0.00

Quality Control

130

Identify as per dwg & Stock Location: **ST242A** 0.00**\*130\***

Packaging

Memo

0.00

Packaging

140

QC21- Final Inspection - Work Order Release 0.00

**\*140\***

QC

Memo

0.00

Quality Control

**13/5/21****MC513-05-17**

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  <div style="display: flex; justify-content: space-around;"> <div style="text-align: right;">             Rework <input type="checkbox"/>              Scrap <input type="checkbox"/>              Use-as-is <input type="checkbox"/>              Work Order Update <input type="checkbox"/> </div> <div style="text-align: right;">             Skid-tube <input type="checkbox"/>              Machining <input type="checkbox"/>              Thermoforming <input type="checkbox"/>              Large Fab <input type="checkbox"/> </div> <div style="text-align: right;">             Crosstube <input type="checkbox"/>              Small Fab <input type="checkbox"/>              Finishing <input type="checkbox"/>              Composite <input type="checkbox"/> </div> <div style="text-align: right;">             Water Jet <input type="checkbox"/>              Prod. Eng. Coord. <input type="checkbox"/>              Rec/Store/Packaging <input type="checkbox"/>              Supplier <input type="checkbox"/> </div> <div style="text-align: right;">             Engineering <input type="checkbox"/>              Quality <input type="checkbox"/>              Other <input type="checkbox"/> </div> </div>								
<b>Root Cause</b>	<b>Date</b>	<b>Step</b>	<b>Qty</b>	<b>Description of work order update or Non-conformance</b>	<b>Initial Chief Eng</b>	<b>Action Description</b>	<b>Sign &amp; Date</b>	<b>Verification</b>	<b>QC Inspector</b>			
Doc/Data <input type="checkbox"/>												
Equip/Tooling <input type="checkbox"/>												
Operator <input type="checkbox"/>												
Material <input type="checkbox"/>												
Setup <input type="checkbox"/>												
Other <input type="checkbox"/>												
Process <input type="checkbox"/>												
Supplier <input type="checkbox"/>												
Training <input type="checkbox"/>												
Unapproved <input type="checkbox"/>												
<b>FAULT CATEGORY</b>												
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other			

# Picklist Print

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Page 1

Work Order ID: 101179

Parent Item: D4022-3

Start Date: 5/02/13

Required Date: 5/08/13

Parent Item Name: Fuel Pump Mounting Bracket

Start Qty: 10.00

Required Qty: 10.00

Comments: IPP rev A 09.12.23 new Issue Prelim EC verified by: DD IPP Rev:B 10.05.17 as per ECN10-562 DD verf:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
TC 250-100 Fuel Pump		Purchased	No			110	Each	0.0000	1	10			

101179

6/3/16 (10)

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  <div style="display: flex; justify-content: space-around;"> <div>             Rework <input type="checkbox"/>              Scrap <input type="checkbox"/>              Use-as-is <input type="checkbox"/>              Work Order Update <input type="checkbox"/> </div> <div>             Skid-tube <input type="checkbox"/>              Machining <input type="checkbox"/>              Thermoforming <input type="checkbox"/>              Large Fab <input type="checkbox"/> </div> <div>             Crosstube <input type="checkbox"/>              Small Fab <input type="checkbox"/>              Finishing <input type="checkbox"/>              Composite <input type="checkbox"/> </div> <div>             Water Jet <input type="checkbox"/>              Prod. Eng. Coord. <input type="checkbox"/>              Rec/Store/Packaging <input type="checkbox"/>              Supplier <input type="checkbox"/> </div> <div>             Engineering <input type="checkbox"/>              Quality <input type="checkbox"/>              Other <input type="checkbox"/> </div> </div>		<b>AGAINST DEPARTMENT/PROCESS</b>						
<b>Root Cause</b>	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector			
Doc/Data												
Equip/Tooling												
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Other												
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Supplier												
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FAULT CATEGORY			
<b>Landing Gear</b>  <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b>  <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other

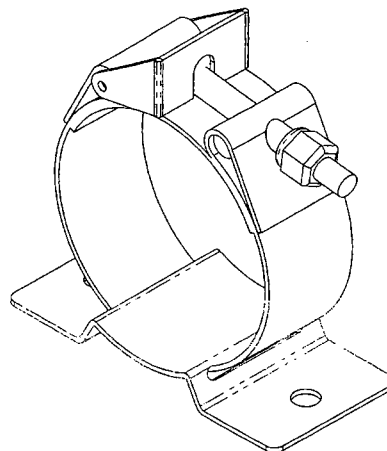
DART AEROSPACE  
PART NUMBER

D4022-3

JOHN CAMERON AVIATION  
PART NUMBER

REF JCA/M47/D3/SHT 13

# SPECIFICATION CONTROL DRAWING



DART PART NUMBER	POSSIBLE SUPPLIER	SUPPLIER PART NUMBER	MATERIAL	FITS MOTOR SIZE (Ø)
D4022-3	WELDON	TC 250-100	STAINLESS STEEL	2.5
	AIRCRAFT SPRUCE AND SPECIALTY	05-00021	STAINLESS STEEL	2.5
	AEROSPARES ACCESSORIES	TC 250-100	STAINLESS STEEL	2.5



## D4022-X FUEL PUMP MOUNTING BRACKET

2012-03-02  
JMB

### NOTES:

- 1) MATERIAL: N/A
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: N/A

DESIGN	JE	<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA	
DRAWN	JE		
CHECKED	JE	DRAWING NO. <b>D4022</b>	REV. C
MFG. APPR.			SHEET 3 OF 4
APPROVED	MP	TITLE:	SCALE
DE APPR.	JE	<b>FUEL PUMP</b>	NTS.
DATE	12.02.09	COPYRIGHT © 2010 BY DART AEROSPACE LTD <small>THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>	



Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Tel: 613 632 9577  
Fax: 613 632 1053

## PURCHASE ORDER

Purchase Order ID PO19767

Purchase Order Date 5/02/13

PO Print Date 5/02/13

Page Number 1 of 1

Order From :

VU-AER004

AEROSPARES ACCESSORIES INC  
20544 CONCESSION # 9,  
RR #2  
ALEXANDRIA, ON K0C 1A0  
CANADA

Contact Name

Vendor Phone 800 355 2157

Vendor Fax 613 525 0925

Vendor Account Nbr

Buyer

Chantal Lavoie

Requisition Nbr

Tax Resale Nbr 10127-2607

Terms

Net 30

Currency

USD

FOB

Destination-Collect

Ship To :

DART AEROSPACE LTD

1270 ABERDEEN  
HAWKESBURY, ON K6A 1K7  
CANADA

**FAXED**  
6/13/05/02

Line Nbr	Reference Revision ID Vendor Part Number	Description/ Mfg ID	Req Date/ Taxable	Req Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
1	TC 250-100	Fuel Pump	5/08/13 Yes	10.00 Each	FedEx PI collect	\$36.4000	\$364.00

Special Inst: AS PER DWG D4022 REV. C  
B101179

PO Total:

\$364.00

CERTIFICATE OF CONFORMITY  
REQ'D UPON DELIVERY

Change Nbr: 1

Change Date: 5/02/13

No substitution or deviation without  
consent.  
Certificate of Conformity or Material  
Certification required - YES NO



## AEROSPARES ACCESSORIES INC.

20544 CON #9 ,R.R. #2  
ALEXANDRIA, ONT. K0C-1A0  
TEL 613-525-0924 FAX 613-525-0925

**Invoice**

DATE	INVOICE NO.
5/15/2013	22565

<b>BILL TO</b>
DART AEROSPACE LTD. 1270 ABERDEEN STREET HAWKESBURY, ON K6A-1K7

<b>SHIP TO</b>
DART AEROSPACE LTD. 1270 ABERDEEN STREET HAWKESBURY, ON K6A-1K7

P.O. NO.	TERMS	REP	SHIP DATE	SHIP VIA	FOB
19767	Net 30	USD	5/15/2013	FEDEX COLL...	ALEXANDRIA

ITEM	DESCRIPTION	Btch.	S/N	QTY	RATE	AMOUNT
TC250-100	CLAMP ( 2.50 DIA )	3042	N/A	5	36.40	182.00T
F/C	TC250-100 NEW WELDON SHIPPING & HANDLING FEDEX COLLECT	W.B. 898555763494			0.00	0.00
	Business Number: 881274476					

The parts supplied hereon were  
acquired directly from the O.E.M.,  
or an approved supplier/repair  
station which maintains a quality  
assurance system providing full  
traceability to source of supply.

Signature 

23.66

0.00

Thank you for your business.

**TOTAL**

\$205.66

Cores must be rebuildable and should be returned within  
15 days for full credit .Thank you.

## AEROSPARES ACCESSORIES INC.

20544 CON #9 ,R.R. #2  
 ALEXANDRIA, ONT. K0C-1A0  
 TEL 613-525-0924 FAX 613-525-0925

**Invoice**

DATE	INVOICE NO.
5/3/2013	22552

<b>BILL TO</b>
DART AEROSPACE LTD. 1270 ABERDEEN STREET HAWKESBURY, ON K6A-1K7

<b>SHIP TO</b>
DART AEROSPACE LTD. 1270 ABERDEEN STREET HAWKESBURY, ON K6A-1K7

P.O. NO.	TERMS	REP	SHIP DATE	SHIP VIA	FOB
19767	Net 30	USD	5/3/2013	FEDEX P1 CO...	ALEXANDRIA

ITEM	DESCRIPTION	Btch.	S/N	QTY	RATE	AMOUNT
TC250-100	CLAMP ( 2.50 DIA ) NEW	2955	N/A	5	36.40	182.00T
F/C	WELDON SHIPPING & HANDLING FEDEX COLLECT  Business Number: 881274476	W.B. 898555763472			0.00	0.00

The parts supplied hereon were  
 acquired directly from the O.E.M.,  
 or an approved supplier/repair  
 station which maintains a quality  
 assurance system providing full  
 traceability to source of supply.

Signature \_\_\_\_\_

23.66
0.00

Thank you for your business.

**TOTAL**

\$205.66

Cores must be rebuildable and should be returned within  
 15 days for full credit .Thank you.